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## BIB DATA SHEET

CONFIRMATION NO. 3912

<b>SERIAL NUMBER</b> 10/575,507	<b>FILING or 371(c) DATE</b> 07/07/2008 <b>RULE</b>	<b>CLASS</b> 128	<b>GROUP ART UNIT</b> 3764	<b>ATTORNEY DOCKET NO.</b> 1512-86	
<b>APPLICANTS</b> Gilbert Grasmuck, Colomiers, FRANCE; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/FR2003/003030 10/15/2003 <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 07/08/2008					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /KATHRYN D SHEIKH/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWINGS</b> 1	<b>TOTAL CLAIMS</b> 17	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> EGBERT LAW OFFICES 412 MAIN STREET, 7TH FLOOR HOUSTON, TX 77002 UNITED STATES					
<b>TITLE</b> Respiratory Assistance Device					
<b>FILING FEE RECEIVED</b> 515	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		